

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

**09/926841**

FILING DATE

**31 DEC 2001**

APPLICANT(S)

*Jama Shiba*

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/		/		51						
2	/	/	/	/	/	/	52						
3	/		/		/		53						
4	/	/	/	/	/	/	54						
5			/		/		55						
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43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	2	↓	2	↓	2	↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	7	↓	2	↓		↓	TOTAL DEP.		↓		↓		↓
TOTAL CLAIMS	9		4				TOTAL CLAIMS						